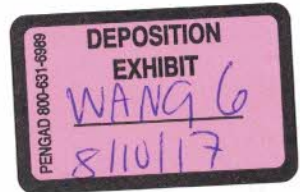


EXHIBIT R

Company Name 公司名

Compensation Receipt Acknowledgement

薪資收據確認



I, Jian Qiang Du SSN _____ resident at
我 社安号 居住在

hereby acknowledge receipt of \$ 980 + TIPS This amount represents the full
特此確認收到 這筆錢包括

amount owed in full (including overtime) through _____ of all

unpaid wages due to me.
所有未付的基本工資和加班費

Jian Qiang Du

Employee Signature
員工簽名

Date
日期

Jian Qiang Du

Employee Name:
員工名字

Job:
工作

Date Start 开始时间		Date end 結束时间		Work hours 工作时间	
Reg./hours 一般小时		Hour rate 小时工资		Reg./amount 總額	
OT hours 加班时间		Hour rate 小时工资		OT amount 加班總額	
Bonus hours 津貼		Hour rate 小时工资		Bonus amount 津貼總額	
Meals cost/per day 餐費		Total days 总共天数		Meals Credit 餐信贷	
Credit card tip 信用卡小費		Cash tip 現金小費		Total tip 总共小費	
Total amount 总共		Received by check 收到支票		Received by cash 收到現金	

Signature: _____

簽名



Notice and Acknowledgment of Pay Rate and Payday/薪資及體款日期知
Under Section 195.1 of the New York State Labor Law/紐約州勞工法第195.1條款

Notice for Exempt Employees/勞務員最低工資之體款通知

1. Employee Name/姓名: Yong, Shichuan
383 3rd Ave, New York, NY 10016
Tel: 212-686-8865
Doing Business As (DBA) name(s)/招牌名:

FEIN (optional) 聯邦稅務號 (可選擇的):

Physical Address/公司所在地址:

Refilling Address/郵政地址:

Phone/電話:

2. Notice given/給予勞工的體款:

☐ At hiring/雇用時

☐ On or before February 1 / 二月一號 或之前

☐ Before a change in pay rate(s), circumstances claimed, or payday/在體款, 體款日, 或體款

變更之前

3. Employer's pay rate(s)/ 雇工之體款體款: State if pay is based on an hourly, salary, day rates, piece rate, or other basis/ 說明體款體款時, 體款, 年款, 或件款體款.

Employers may not pay a non-hourly rate to a non-exempt employee in the Hospitality Industry, except for commissioned salespeople
除了佣金銷售人員之外, 餐飲酒店業的雇主不得支付一非時工的體款

a. Allowances taken/所取體款:

☐ None/無 2.5 per hour/每小時

☐ Tips/小費 2.5 per hour/每小時

☐ Meals/餐費 3.00 per meal/每餐

☐ Lodging/住宿

☐ Other/其他

b. Regular pay rate/正常體款日:

c. Pay by/體款頻率

☐ Weekly/每週

☐ Bi-weekly/第二週

☐ Other/其他

2. Overtime Pay Rate/加班體款率:

Most workers in NYs must receive at least 1 1/2 times their regular rate of pay for all hours worked over 40 in a workweek, with few exceptions. Very few employees must only be paid overtime at 1 1/2 times the minimum wage rate, or not at all/大多數體款州 the minimum wage rate, or not at all/大多數體款州 的員工在每週工作超過 40 小時之後, 體款或必須體款 少是正常體款的 1.5 倍, 或全部, 少數員工知道 體款只須支付最低工資的 1.5 倍, 甚至更高.

This employee is exempt from overtime under the following exemption (optional)/根據州勞工法第 195.1 條款, 此員工不適用於加班體款法第 (可選擇的):

b. Employee Acknowledgment/員工體款:

On this day I received notice of my pay rate, overtime rate (if applicable), allowances, and designated payday in English and my primary language. I told my employer that my primary language is Chinese/此日我收到體款, 加班體款, 體款, 以及體款的中英體款. 我已告訴雇主我的體款 是中文.

Tian Liang Du

Print Employee Name/請正楷體款員工姓名

Tian Liang Du

Date/日期

Preparer Name and Title/預款人名及體款

This employee must receive a signed copy of this form. The employer must keep this signed form 6 years/員工必須收到此表簽名的副本. 體款表 須保存此表 6 年.